FORM D

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UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, DC 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR**

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008

Estimated average burden hours per response...16

SEC	Use On	Jse Only					
Prefix		Serial					
DATE	RECEIV	'ED					

Filing Under (Check box(es) Type of Filing:	that apply): ew Filing	Rule 504 Amendment	☐ Rule 505		Section 4(6)) ULOE
		А. В	ASIC IDENTI	FICATION DAT	`A	
1. Enter the information r Name of Issuer (c c c c c c c c c c c c c c c c c c	heck if this is	an amendment and nar	ne has changed, and	indicate change.)		07079202
Address of Executive Office 1600 Dove Street, Sui		(Number of Street, CA		·)	Telephone numb (949) 863-10	er (including area code)
Address of Principal Busines (if different from Executive		Number and Street, Co	ity, State, Zip Code)	Telep	hone number (includi	ng area code)
Brief Description of Busines Real estate investmen and Cascade Townshi	t in a portf ip, Michiga					ated in Kentwood, W
Type of Business Organizati corporation business trust	🔲 limite	ed partnership, already ed partnership, to be fo		other (please limited liabil		PROCESSI
corporation business trust	limite	ed partnership, to be fo		limited liabil	ity company	PROCESSI Estima GCT 1 0 2007
	limite limite	or Organization:	Montl 09 J.S. Postał Service a	limited liabil Year 07	ity company	PROCESSI Estima OCT 1 0 2007 B THOMSON FINANCIAL

photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto,

the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate state will not result in loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated upon the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972(2-97)

A. BASIC IDENTIFICATION DATA

Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) CORE Realty Holdings, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Dove Street, Suite 450, Newport Beach, CA 92660 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) William R. Colvin Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Dove Street, Suite 450, Newport Beach, CA 92660 Check Box(es) that Apply: ☐ Beneficial Owner Promoter Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Sterling McGregor Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Dove Street, Suite 450, Newport Beach, CA 92660 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Douglas Morehead Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Dove Street, Suite 450, Newport Beach, CA 92660 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) John Saunders Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Dove Street, Suite 450, Newport Beach, CA 92660 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ■ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Aaron G. Cook Business or Residence Address (Number and Street, City, State, Zip Code)

1600 Dove Street, Suite 450, Newport Beach, CA 92660

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first, if Geffrey L. Fralick	individual)				
Business or Residence Address 1600 Dove Street, Suite					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	s (Number and Stre	eet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)		•.		· · · · · · · · · · · · · · · · · · ·
Business or Residence Address	ss (Number and Stre	eet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	ss (Number and Stre	eet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)	- •			
Business or Residence Address	ss (Number and Stre	eet, City, State, Zip Code)			<u></u>
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
	(Use	blank sheet, or copy and use	additional copies of this shee	t, as necessary)	

				В.	INFORM	MATION	ABOUT	OFFERI	NG			
. Has	s the issuer so	old, or does th	he issuer into								Yes	No 🗵
) Wh	at is the mini	mum investr	ment that wil			appendix, Co odividual?		-			\$ 25,00	00
(Iss	suer reserves	the right to	accept less	than the m	inimum pur	chase requi	rement)				Yes	No
. Do	es the offerin	g permit join	t ownership	of a single t	mit?	• • • • • • • • • • • • • • • • • • • •	* * * * * * * * * * * * * * * * * * * *				⊠	
olicitation vith the ou may	ter the inform on of purchas SEC and/or waset forth the	sers in conne vith a state or information t	ction with s r states, list t for that brok	ales of secur he name of	rities in the o the broker or	offering. If a	person to b	e listed is a	n associated	person or ag	ent of a bro	ker or deal
	·		•									
	or Residence love Street											
	Associated B Capital N						•					
	Which Perso neck "All Stat											All States
AL] X	[AK] X	[AZ] X	[AR] X	[CA] X	(CO) X	[CT] X	[DE] X	[DC] X	[FL] X	[GA] X	(HI] X	[ID] X
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мт] х	[NE] X	[NV] X	[NH] X	[NJ] X	[NM] X	[NY] X	[NC] X	[ND] X	[OH] X	[OK] X	[OR] X	[PA] X
RIJ X	[SC] X	[SD] X	[TN] X	[TX] X	(UT) X	(VT) X	[VA] X	[WA] X	[wv] x	[WI] X	[WY] X	[PR]
·	or Residence Associated E			treet, City,	State, Zip Co	de) 						
	Which Perso neck "All Stat											All States
AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
MT]	(NE)	[NV]	(NH)	[[1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ull Nan	ne (Last name	first, if indi	vidual)									
lusiness	or Residence	: Address (N	umber and S	treet, City,	State, Zip Co	de)						
lame of	Associated B	Broker or Dea	aler									
	Which Personeck "All Stat											All States
AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI)	[ID]
IL}	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
RIJ	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES, AND USE OF PROCEEDS

	exchanged. Type of Security		gregate ing Pric	e		nt Already Sold
	Debt	\$	0		\$	0
	Equity	\$	0		\$	0
	Convertible Securities (including warrants)	\$	0		\$	0
	Partnership Interests	\$	0		\$	0
	Other (Limited Liability Company Interests)	\$	17,00	0,000	s	0
	Total	\$_	17,00	0,000	\$	0
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."		ımber		Dollar	regate Amount rchases
	A condited towards	11144	0		e e	0
	Accredited Investors				هــــــ	0
	Non-accredited Investors		0		3 <u></u>	
	Total (for filings under Rule 504 only)		0		2	0
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.					
		т	c		Delle	
	Type of Offering		e of urity			Amount Sold
	Type of Offering Rule 505					
	Rule 505					
	Rule 505					
4 .	Rule 505	Secondary 1	urity			
1 .	Rule 505	Secondary to a may be ate	urity e			Sold
1.	Rule 505	Secondary to many the same	urity		\$ \$ \$	Sold
1.	Rule 505	n may b	writy	. 🛛	\$ \$ \$	Sold
1.	Rule 505	n may t	urity ee	. 🛭	\$ \$ \$	0 10,000
1.	Rule 505	n may bate	we	. 🛭	\$ \$ \$	0 10,000 50,000
1.	Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information given as subject to future contingencies. If the amount of expenditures is not known, furnish an estimand check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees	n may b	writy e	. 🔯 . 🔯 . 🗆	\$ \$ \$	0 10,000 50,000
4.	Rule 505	n may t	we e	. 🔯 . 🔯 . 🗆	\$ \$ \$	0 10,000 50,000 0

Indicate each of check the proceed	oss proceeds to the issuer." below the amount of the adjusted gross proceeds to the purposes shown. If the amount for any purpose is the box to the left of the estimate. The total of payments to the issuer set forth in response to Part C - Question and fees	not known, furnish an estimate and s listed must equal the adjusted gross n 4.b, above.	Of Dire	nents to ficers, ctors &	Payments To
		⊠	Of Dire	ficers, ctors &	Payments To
		🖂		iliates	Others
Purchas		—	\$ <u>61</u>	<u>2,000</u>	□ \$ <u> </u>
i ui ciias	e of real estate		\$	<u>0</u>	■ \$ <u>12,790,400</u>
Purchas	e, rental, or leasing and installation of machinery and	equipment	\$	<u>0</u>	□ \$ <u> </u>
Constru	ction or leasing of plant buildings and facilities		\$	<u>0</u> .	□ \$ <u> </u>
Acquisi	tion of other businesses (including the value of securi	ies involved in this			
_	t to a merger)		\$	0	□ \$ <u> </u>
Repaym	nent of indebtedness		\$	0	□ \$ <u> </u>
Workin	g capital (reserves)		\$	0	⊠ \$ <u>268,400</u>
Other (s	specify): loan fees and costs and real estate transaction	costs	\$	<u> </u>	□ \$_1,264,200
Column	Totals		\$ <u>6</u>	12,000	⊠ \$ <u>14,323,000</u>
Total Pa	ayments Listed (column totals added)		⊠	\$ <u>14,93</u>	5,000

President of CORE Realty Holdings, LLC,

the Manager of Issuer

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

William R. Colvin

END